

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information

Amendment
☐ Yes ☒ No

1. Committee Information			
a. Full Name Committee to Elect Roger Fish Mayor		c. ID Number RF122214	
b. Mailing Address (include City, State and Zip Code) 3905 Waters Reach Ln Indian Trail, NC 28079		d. Date Filed 09/29/2015	
		e. Phone Number 704 821 6577	
2. Report Year 2015	3. Period Start Date (mm/dd/yy) 01/01/2015	4. Period End Date (mm/dd/yy) 09/22/2015	5. Treasurer Full Name Nancy Lynn Jacobsen
6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent <input type="checkbox"/> Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		9. Type of Report (check only one type of report from one category) Municipal <input type="checkbox"/> Organizational <input checked="" type="checkbox"/> Thirty-five day State/County <input type="checkbox"/> Organizational <input type="checkbox"/> Quarterly Referendum <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special	
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		10. Special Report Name	
8. Number of Fundraisers this Report 0			
11. Account Information a. Financial Institution Full Name BB+T b. Purpose Checking c. Account Code A d. Period Begin Balance \$ 350.00		11. Account Information a. Financial Institution Full Name PayPal b. Purpose Online payme and receipt c. Account Code B d. Period Begin Balance \$ 0.00	
CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections. Nancy Jacobsen Printed Name of Signer Nancy Jacobsen Signature of Appointed Treasurer 09/29/2015 Date			
FOR OFFICE USE ONLY Date Received: 9/30/15 Date Postmarked: 9/29/15 Date Scanned: 10/1/15 Date Data Entered: _____ Employee: K. J. J. J. Employee: K. J. J. J. Employee: K. J. J. J. Employee: _____ Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training			
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-B) to make committee changes.			

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information.

Amendment			
<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Committee to Elect Roger Fish Mayor		Thirty-Five Day		RF122214	
Start of Election Cycle:		January 1,		2015	
		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 1,602.63		\$	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 350.00		\$ 650.00	
6) Contributions from Individuals (CRO-1210)		\$ 4,452.59		\$ 2,383.43	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$ 2,000.00	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund -- Other Sources (CRO-1270)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 4,802.59		\$ 9,836.02	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 2,860.12		\$ 6,217.49	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$ 52.59		\$ 126.02	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 2,912.71		\$ 6,343.51	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 3,492.51		\$ 3,492.51	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$ 291.21			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2200)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Aggregated Contributions from Individuals

Page

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Amendment
☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Roger Fish Mayor					RF122214	
3. Contributor Information						
a. Amend		b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount
<input type="checkbox"/>	Add	A	Cash		07/13/2015	\$ 10.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Cash		07/13/2015	\$ 10.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Cash		08/17/2015	\$ 40.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Cash		07/22/2015	\$ 10.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Check		08/18/2015	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Check		08/18/2015	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Cash		08/24/2015	\$ 10.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Cash		08/24/2015	\$ 10.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Cash		08/29/2015	\$ 10.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	PayPal		09/12/2015	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Cash		09/10/2015	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add	A	Cash		09/10/2015	\$ 50.00
<input type="checkbox"/>	Remove					
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
<input type="checkbox"/>	Add					\$
<input type="checkbox"/>	Remove					\$
4. Total only this Page					\$ 350.00	
5. Total of ALL CRO-1205 Pages					\$ 350.00	
<i>(This line must be on line 5 of Detailed Summary Page CRO-1100)</i>						

Contributions from Individuals

Pg 1 of 4

Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Roger Fish Mayor					RF122214	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Larry S. Helms 3216 McClendon Rd Matthews, NC 28104 704-893-2793			Owner			
			c. Employer's Name/Specific Field			
			Insurance Carrier			
					e. Election Sum to Date	
					\$ 500.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	01	Check		07/29/2015		\$ 500.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Ruth J. Fish Tencati 3229 Williams Road Matthews, NC 28105			Teacher			
			c. Employer's Name/Specific Field			
			Educational Services			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	A	Check		07/22/2015		\$ 200.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Pamela De Maria 1108 Hunters Trail Drive Indian Trail, NC 28079			Retired			
			c. Employer's Name/Specific Field			
			YMCA			
					e. Election Sum to Date	
					\$ 506.67	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	A	Check		07/22/2015		\$ 250.00
<input type="checkbox"/>		Credit Car	Bagels	08/29/2015		\$ 6.67
<input type="checkbox"/>						\$
4. Total only this Page					\$ 956.67	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4,452.59	

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Contributions from Individuals

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Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Roger Fish Mayor					RF122214	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Ryan Fish 1401 Great Road Waxhaw, NC 28173			Project Manager			
			c. Employer's Name/Specific Field			
			Cardinal Solutions			
					e. Election Sum to Date	
					\$ 200.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		07/22/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
R Dean Harrell 2400 Beulah Church Rd Matthews, NC 28104 704 821 6358			Owner			
			c. Employer's Name/Specific Field			
			Construction/Land Development			
					e. Election Sum to Date	
					\$ 3,000.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		08/28/2015	\$ 3,000.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Robert Hinson 3018 Hampton Downs Dr Monroe, NC 28112 704-218-3118			Teacher			
			c. Employer's Name/Specific Field			
			Educational Services			
					e. Election Sum to Date	
					\$ 100.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>	A	Check		09/01/2015	\$ 100.00	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page					\$ 3,200.00	
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 4,452.59	

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Contributions from Individuals

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Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Roger Fish Mayor					RF122214	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Steven Ambrosio 3837 Smith Farm Rd Matthews, NC 28104			Business Owner			
			c. Employer's Name/Specific Field			
			Specialty Trade			
					e. Election Sum to Date	
					\$ 250.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>	A	Check		08/27/2015		\$ 250.00
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Nancy Lynn Jacobsen 3905 Waters Reach Ln Indian Trail, NC 28079 704 821 6577			Homemaker			
			c. Employer's Name/Specific Field			
			N/A			
					e. Election Sum to Date	
					\$ 397.36	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		Credit Car	Fruit Juice	08/24/2015		\$ 6.84
<input type="checkbox"/>		Credit Car	Fruit	08/27/2015		\$ 1.58
<input type="checkbox"/>		Cash	Door Prize	08/27/2015		\$ 25.00
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Nancy Lynn Jacobsen 3905 Waters Reach Ln Indian Trail, NC 28079			Homemaker			
			c. Employer's Name/Specific Field			
			N/A			
					e. Election Sum to Date	
					\$ 397.36	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)		k. Amount
<input type="checkbox"/>		Credit Car	Postage	09/08/2015		\$ 2.54
<input type="checkbox"/>						\$
<input type="checkbox"/>						\$
4. Total only this Page					\$ 285.96	
5. Total of ALL CRO-1210 Pages					\$ 4,452.59	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

CRO-1210

NC State Board of Elections

April 2007

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Union Co. Board of Elections

Contributions from Individuals

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Amendment
☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Roger Fish Mayorl					RF122214	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
Tiffany McGee 5013 Singletree Ln Indian Trail, NC 28079			Director			
			c. Employer's Name/Specific Field			
			Power Supply Company			
					e. Election Sum to Date	
					\$ 9.96	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>		Credit Car	Coffee	08/29/2015	\$ 9.96	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Job Title/Profession		d. Comments	
			c. Employer's Name/Specific Field			
					e. Election Sum to Date	
					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
<input type="checkbox"/>					\$	
4. Total only this Page Union Co. Board of Elections						
					\$ 9.96	
5. Total of ALL CRO-1210 Pages						
					\$ 4,452.59	
<i>(This line must be on line 6 of Detailed Summary Page CRO-1100)</i>						

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SEP 30 2015

Disbursements

Pg 1 of 5

Amendment
☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable) Committee to Elect Roger Fish Mayor					2. ID Number RF122214	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) United States Post Office 210 Postage Way Indian Trail, NC 28079-9701			b. Coordinated Committee Name 		d. Comments 	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ 29.65	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	I	07/20/2015	\$ 5.75		
A	Debit Card	I	09/16/2015	\$ 5.75		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) 801 Designs, LLC 3028 Semmes Ln Indian Trail, NC 28079 704 684 0301			b. Coordinated Committee Name 		d. Comments 	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ 80.06	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	07/15/2015	\$ 80.06	Baseball Caps	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Huck's Sportswear 648 Matthews-Mint Hill Road Matthews, NC 28105			b. Coordinated Committee Name 		d. Comments 	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ 1,270.47	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	07/21/2015	\$ 560.44	T-Shirts	
				\$		
5. Total only this Page					\$ 652.00	
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 2,860.12	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media B* - Printing C* - Fundraising E - Salaries F* - Equipment G - Political Party I - Postage J - Penalties K* - Office Expenses O* - Other						
* Codes require detailed explanation in required remarks field (k)						

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SEP 30 2015

☐ To Another Candidate
☐ Holding Public Office Expenses
☐ Donation to Legal Expense Fund

Disbursements

Pg 2 of 5

Amendment
☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable) Committee to Elect Roger Fish Mayor					2. ID Number RF122214	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Town of Indian Trail 100 Navajo Trail Indian Trail, NC 28079 704 821 5401			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 20.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	O	08/18/2015	\$ 20.00	Vendor Application Fee	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Roger Fish 11001 Magna Lane Indian Trail, NC 28079 704 635 5390			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 172.65	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	B	08/18/2015	\$ 172.65	Toner purchase	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Metrolina Native American Association 8001 N. Tryon St. Charlotte, NC 28262 704 750 9609			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 150.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
B	Debit Card	A	08/18/2015	\$ 150.00	Ad for Program Book	
				\$		
5. Total only this Page					\$ 342.65	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 2,860.12	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Donation to Legal Expense Fund
O* - Other						
* Codes require detailed explanation in required remarks field (k)						

RECEIVED

SEP 30 2015

Disbursements

Pg 3 of 5

Amendment
☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable) Committee to Elect Roger Fish Mayor					2. ID Number RF122214	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Paper & Inc Printing 740 Stallings Rd Matthews, NC 28104 704-821-4500			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ 1,157.18	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	B	08/21/2015	\$ 87.54	Banner and post	
A	Debit Card	B	08/14/2015	\$ 305.31	Rack Cards	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) All Star Signs 241 Post Office Dr., Suite 7A Indian Trail, NC 28079 704 821 4330			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ 157.43	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	O	08/27/2015	\$ 157.43	Signs	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Office Depot Office Max 1030 Wst Roosevelt Blvd Monroe, NC 28110			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify) <input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date \$ 10.29	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	K	08/27/2015	\$ 10.29	Copy Paper	
				\$		
5. Total only this Page					\$ 560.57	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 2,860.12	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
<div style="display: flex; justify-content: space-between;"> <div> A* - Media E - Salaries I - Postage O* - Other </div> <div> B* - Printing F* - Equipment J - Penalties </div> <div> C* - Fundraising G - Political Party K* - Office Expenses </div> <div> D - To Another Candidate H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund </div> </div>						
* Codes require detailed explanation in required remarks field						

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SEP 30 2015

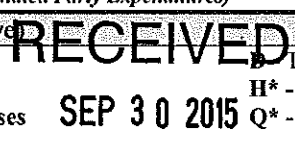
Union Co. Board of Elections

Disbursements

Pg 4 of 5

Amendment
☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
Committee to Elect Roger Fish Mayor					RF122214	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Party Bell 754 Village Park Dr. Powell, OH 43065 909-992-0502						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 58.11	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	O	09/03/2015	\$ 58.11	Candy Prizes	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Jason Curts JLC Writing Services 933 Ashburne Pl Indian Trail, NC 28079 704-771-4952						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 900.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	A or O	09/04/2015	\$ 300.00	Web Services	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Custom Sign Banner Premium Graphic 5512 Mitchelldale Houston, TX 77092 800-683-2926						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 349.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	B	07/14/2015	\$ 180.70	Banner	
				\$		
5. Total only this Page					\$ 538.81	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 2,860.12	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
<div style="display: flex; justify-content: space-between;"> <div> A* - Media E - Salaries I - Postage O* - Other </div> <div> B* - Printing F* - Equipment J - Penalties </div> <div> C* - Fundraising G - Political Party K* - Office Expenses </div> <div> D - To Another Candidate H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund </div> </div>						
<div style="text-align: center;">  </div>						
* Codes require detailed explanation in required remarks field						

Disbursements

Pg 5 of 5

Amendment
☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee Full Name (and Fund if applicable) Committee to Elect Roger Fish Mayor					2. ID Number RF122214	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i> <input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Paper & Inc. Printing 740 Stallings Rd Matthews, NC 28104 704-821-450			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
			e. Election Sum to Date			
				\$ 1,157.19		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	B	09/01/2015	\$ 305.31	Rack Cards	
A	Debit Card	B	09/15/2015	\$ 459.03	Rack Cards	
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) PayPal 2211 North First Street San Jose, CA 888-221-1161			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
			e. Election Sum to Date			
				\$ 6.70		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Auto Withdra	O	09/12/2015	\$ 1.75	Bank Fee	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
			e. Election Sum to Date			
				\$		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
				\$		
				\$		
5. Total only this Page					\$ 766.09	
6. Total of ALL CRO-1310 Pages <i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 2,860.12	
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media		B* - Printing		C* - Fundraising		D - To Another Candidate
E - Salaries		F* - Equipment		G - Political Party		H* - Holding Public Office Expenses
I - Postage		J - Penalties		K* - Office Expenses		Q* - Donation to Legal Expense Fund
O* - Other						
* Codes require detailed explanation in required remarks						

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SEP 30 2015

Union Co. Board of Elections

Outstanding Loans

Pg 1 of 1

Amendment

☐

Yes

☒

No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)			2. ID Number		
Committee to Elect Roger Fish Mayor			RF122214		
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
Nila Modesta Salazar Fish 11001 Magna Lane Indian Trail, NC 28079		Homemaker			
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
		None		02/23/2015	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance	
0.0 %	None	\$ 2,000.00		\$ 2,000.00	
k. Full Name of Lending Institution				l. Loan Number	
N/A				N/A	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance	
%		\$		\$	
k. Full Name of Lending Institution				l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments	
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)	
				f. End Date (mm/dd/yyyy)	
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance	
%		\$		\$	
k. Full Name of Lending Institution				l. Loan Number	
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4. Total only this Page				\$ 2,000.00	
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)				\$ 2,000.00	

SEP 30 2015

In-Kind Contributions

Pg 1 of 2

Amendment
☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Committee to Elect Roger Fish Mayor		RF122214	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Nancy Lynn Jacobsen 3905 Waters Reach Ln Indian Trail, NC 28079 704 821 6577		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 397.36	
e. Description		f. Date (mm/dd/yyyy)	
Fruit juice		08/24/2015	
		\$ 6.84	
Fruit		08/27/2015	
		\$ 1.58	
Door prize		08/27/2015	
		\$ 25.00	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Nancy Lynn Jacobsen 3905 Waters Reach Ln Indian Trail, NC 28079 704 821 6577		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 397.36	
e. Description		f. Date (mm/dd/yyyy)	
Postage		09/08/2015	
		\$ 2.54	
		\$	
		\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Tiffany McGee 5013 Singletree Lane Indian Trail, NC 2807		<input type="checkbox"/> Individual	
		<input checked="" type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		d. Election Sum to Date	
		\$ 9.96	
e. Description		f. Date (mm/dd/yyyy)	
Coffee		08/29/2015	
		\$ 9.96	
		\$	
		\$	
4. Total only this Page		\$ 45.92	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 52.59	

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In-Kind Contributions

Pg 2 of 2

Amendment

☐ Yes ☒ No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Committee to Elect Roger Fish Mayor		RF122214	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
Pamela DeMaria 1108 Hunters Trail Dr Indian Trail, NC 28079 704 621 7336		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	
Bagels		08/29/2015	
		g. Fair Market Amount	
		\$ 6.67	
		\$	
		\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
		<input type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	
		g. Fair Market Amount	
		\$	
		\$	
		\$	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
		<input type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$	
e. Description		f. Date (mm/dd/yyyy)	
		g. Fair Market Amount	
		\$	
		\$	
		\$	
4. Total only this Page		\$ 6.67	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 52.59	

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SEP 30 2015

Debts and Obligations Owed By the Committee

Pg 1 of 2

Amendment

☐ Yes

☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Committee to Elect Roger Fish Mayor		RF122214	
3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Charlotte Media Group, LLC 10100 Park Cedar Dr., Ste 154 Charlotte, NC 28210 (704) 849-2261		b. Description of Creditor Corporation	
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$ 0	\$ 268.00	\$ 268.00	\$ 268.00
g. Incurred Debts (what the committee received this period)			
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
Charlotte Media Group, LLC 10100 Park Cedar Dr., Ste 154 Charlotte, NC 28210 (704) 849-2261		09/11/2015	\$ 134.00
		g4. Purpose Code	g5. Required Remarks
		A	Ad
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
Charlotte Media Group, LLC 10100 Park Cedar Dr., Ste 154 Charlotte, NC 28210 (704) 849-2261		09/18/2015	\$ 134.00
		g4. Purpose Code	g5. Required Remarks
		A	Ad
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
4. Total only this Page		\$ 268.00	
(This should be the sum of all items 'g3.' from this page)			
5. Total of ALL CRO-1610 Pages		\$ 291.21	
(This line must be on line 22 of Detailed Summary Page CRO-1100)			
6. Purpose Codes (List detailed expenditure code in (g4.))			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other
* Codes require detailed explanation in required remarks field (g5.)			

CRO-1610

NC State Board of Elections

February 2011

SEP 30 2015

Union Co. Board of Elections

Debts and Obligations Owed By the Committee

Pg 2 of 2

Amendment

☐ Yes ☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
Committee to Elect Roger Fish Mayor		RF122214	
3. Creditor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Roger Fish 11001 Magna Lane Indian Trail, NC 28079 (704) 635-5390		b. Description of Creditor Candidate	
c. Beginning Balance	d. Total Amount Paid	e. Total Amount Incurred	f. Remaining Balance
\$ 0	\$ 23.21	\$ 23.21	\$ 23.21
g. Incurred Debts (what the committee received this period)			
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
Walmart 2101 Younts Road Indian Trail, NC 28079 (704) 882-5566		08/31/2015	\$ 23.21
		g4. Purpose Code	g5. Required Remarks
		K	Office supplies
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
g1. Purchase Place Full Name, Mailing Address & Phone (include city, state, & zip)		g2. Date (mm/dd/yyyy)	g3. Amount
			\$
		g4. Purpose Code	g5. Required Remarks
4. Total only this Page (This should be the sum of all items 'g3.' from this page)		\$ 23.21	
5. Total of ALL CRO-1610 Pages (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 291.21	
6. Purpose Codes (List detailed expenditure code in (g4.))			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	Other
* Codes require detailed explanation in required remarks field (g5.)			

CRO-1610

NC State Board of Elections

SEP 30 2015

February 2011

Union Co. Board of Elections

Disclosure Report Cover

Amendment
☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
Do not use this form to update information

1. Committee Information																																							
a. Full Name Committee to Elect Roger Fish Mayor		c. ID Number RF122214																																					
b. Mailing Address (include City, State and Zip Code) 3905 Waters Reach Ln Indian Trail, NC 28079		d. Date Filed 09/29/2015																																					
		e. Phone Number 704 821 6577																																					
RECEIVED SEP 30 2015 Union Co. Board of Elections																																							
2. Report Year 2015	3. Period Start Date (mm/dd/yy) 01/01/2015	4. Period End Date (mm/dd/yy) 09/22/2015	5. Treasurer Full Name Nancy Lynn Jacobsen																																				
6. Type of Committee (Check One) <input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> PAC <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Legal Expense Fund <input type="checkbox"/> Party <input type="checkbox"/> Referendum <input type="checkbox"/> Joint Fundraiser		9. Type of Report (check only one type of report from one category) <table border="1"><thead><tr><th>Municipal</th><th>State/County</th><th>Referendum</th></tr></thead><tbody><tr><td><input type="checkbox"/> Organizational</td><td><input type="checkbox"/> Organizational</td><td><input type="checkbox"/> Organizational</td></tr><tr><td><input type="checkbox"/> Thirty-five day</td><td><input type="checkbox"/> Quarterly</td><td><input type="checkbox"/> Pre-referendum</td></tr><tr><td><input type="checkbox"/> Pre-primary</td><td><input type="checkbox"/> First</td><td><input type="checkbox"/> Final</td></tr><tr><td><input type="checkbox"/> Pre-election</td><td><input type="checkbox"/> Second</td><td><input type="checkbox"/> Supplemental Final</td></tr><tr><td><input type="checkbox"/> Pre-runoff</td><td><input type="checkbox"/> Third</td><td><input type="checkbox"/> Annual</td></tr><tr><td><input type="checkbox"/> Semi-annual</td><td><input type="checkbox"/> Fourth</td><td><input type="checkbox"/> Special</td></tr><tr><td><input type="checkbox"/> Mid Year</td><td><input type="checkbox"/> Semi-annual</td><td></td></tr><tr><td><input type="checkbox"/> Year End</td><td><input type="checkbox"/> Mid Year</td><td></td></tr><tr><td><input type="checkbox"/> Final</td><td><input type="checkbox"/> Year End</td><td></td></tr><tr><td><input checked="" type="checkbox"/> Special</td><td><input type="checkbox"/> Final</td><td></td></tr><tr><td></td><td><input type="checkbox"/> Special</td><td></td></tr></tbody></table>		Municipal	State/County	Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum	<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final	<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final	<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual	<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special	<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year		<input type="checkbox"/> Final	<input type="checkbox"/> Year End		<input checked="" type="checkbox"/> Special	<input type="checkbox"/> Final			<input type="checkbox"/> Special	
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<input checked="" type="checkbox"/> Special	<input type="checkbox"/> Final																																						
	<input type="checkbox"/> Special																																						
7. Type of Fund (if applicable, check one) <input type="checkbox"/> "Booster Fund" <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:		10. Special Report Name																																					
8. Number of Fundraisers this Report 0																																							
11. Account Information		11. Account Information																																					
a. Financial Institution Full Name BB+T		a. Financial Institution Full Name PayPal																																					
b. Purpose Checking	c. Account Code A	b. Purpose Online payment and receipt	c. Account Code B																																				
	d. Period Begin Balance \$ 350.00		d. Period Begin Balance \$ 0.00																																				
CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections. Nancy Jacobsen Printed Name of Signer Nancy Jacobsen Signature of Appointed Treasurer 09/29/2015 Date																																							
FOR OFFICE USE ONLY Date Received: 9/30/15 Date Postmarked: 9/29/15 Date Scanned: 10/1/15 Date Data Entered: _____ Employee: K. J. J. J. Employee: K. J. J. J. Employee: K. J. J. J. Employee: _____ Delivery Method <input checked="" type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training																																							
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.																																							



North Carolina
State Board of Elections
441 N Harrington Street
Raleigh, NC 27603

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SEP 30 2015

Union Co. Board of Elections

Kim Westbrook Strach
Executive Director

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173

Contribution from a Business Account Statement

This Statement allows a committee to accept a check from a business account where the contributor declares that they have no personal checking account and that the funds are their own personal funds.

Steven Ambrosio

I, _____ am the individual making the contribution of \$ 250 to the _____ Committee.
Elect Robert Fish

The account from which the funds are drawn is in the name of Full Service Plumbing Co Inc

☐ Check if the contribution is a draft from a paycheck.

I do not have a personal checking account, in my name, from which this contribution could be made or this contribution is made as a result of a draft from personal funds. If the contribution is a draft, please include a written statement from the employer. This statement should be a signed agreement by the contributor that the funds drafted were derived from the personal salary of the contributor.

The funds from which this contribution is derived are my own personal funds and not that of any other individual or "business entity". For purposes of this **Statement**, the term "business entity" will include any "corporation, business entity, labor union, professional association, or insurance company".

I further understand that by signing this **Statement** I am declaring all of the above information is true and accurate. Signing this **Statement** with any portion not being true could result in a Class 2 Misdemeanor.

Signature of Contributor

Note to the treasurer: Please attach a photocopy of the check submitted with this Statement. Maintain this information in your records to be made available upon request.

Note: This Statement is to be filed at the Election Board where the committee's campaign reports are filed.

FULL SERVICE PLUMBING CO, INC.

OPERATING ACCOUNT
P. O. BOX 937
INDIAN TRAIL, NC 28079
PH. 704-821-8746

1599

66-21/530 20129
2000041532124

DATE 8/27/15

PAY
TO THE
ORDER OF Committee to Elect Roger Fish Mayor \$ 250.00
two hundred and fifty DOLLARS



Wells Fargo Bank, N.A.
North Carolina
wellsfargo.com

Good Luck!

 MP

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SEP 30 2015

Union Co. Board of Elections